

Parent Support and Training Center for Children and Families

<http://childrenandfamilies.ku.edu>

Home and Community Based Services Summit
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The Team

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Background, History, & Development

Idea for Parent Support - 1993

- Someone to talk to who will understand and listen.
- Someone to provide support at court, school, and other meetings.
- Most importantly, that the person providing support be a parent who has walked in their shoes.

Background, History, & Development

1997-1999

The Medicaid Home and Community Based Services, Serious Emotional Disturbance (HCBS-SED) Waiver Program was established. The PST Services became a billable service on the new HCBS-SED Waiver. Subsequently, the Family Centered System of Care grants funds derived from tobacco settlement funds provided for the hiring of PST providers at each Kansas CMHC.

Background, History, & Development

2007

Researchers at the [The Center for Children and Families \(CCF\)](#) along with [The Kansas Department of Aging and Disability Services-Behavioral Health Services \(KDADS-BHS\)](#) identified the need to document effective PST services in Kansas in order to preserve and assure expansion of this Family Driven Service.

Background, History, & Development

2010-2014

A well defined model of PST Practice was developed with the assistance of a broad group of stakeholders (families, PST providers, and PST colleagues). Testing and evaluation of the core components of PST Practice shows evidence that when the core components are carried out, youth spend less time in residential placements and away from their families! For details on this collaborative research process please see the [Center for Children and Families Parent Support and Training Project Site.](#)

Family Driven Paradigm

The PST Service is a Catalyst for the Family Driven Paradigm

<https://www.youtube.com/watch?v=-j2yvyPxMLs>

2015!

Would a service like PST help families waiting for Home and Community Based Services?

- Literature review suggested families do feel overwhelmed sometimes, isolated, and are in need of support, especially during transitions
- National agenda on family support movement is closely aligned with the Family Driven Paradigm
- The Kansas Department of Aging and Disability Services-Home and Community Based Services Division & CCF designed a pilot.

How the Intervention Works

An Initial Needs Assessment is conducted

- Families have a chance to see in writing and review what the PST Service is intended to do
- Agreement on Needs
- Conversation and PST seek to understand the families experience, begin building trusting relationship

Families fill out standardized questionnaires

- Caregiver Strain, Social Support, Parenting Strategies, Quality of Life, and Family Empowerment
- PST Reviews measures to understand where the family is coming from in the core domains the intervention is targeting

How the Intervention Works

The PST follows up 2 times a month for 3 months by phone based on what the parent identified they needed and wanted

Outcomes are collected again in 90 days

Supervision is weekly or as needed – parallel process, reflective practice approach

Team meeting weekly

How the Intervention Works

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Supervision is weekly or as needed – parallel process, reflective practice approach

Team meeting weekly – Brainstorm and identify any needs PST have to carry out intervention

Research to Practice

Practice questions are brought up in team

Team identifies which Best Practice area is implicated

Research on topic is consulted & sent to team

Team discusses the research & determines a plan for intervention or support

Follow up on progress

The Pilot-Adapting & Testing PST for Families on the Waitlist

Sample – Randomly selected two groups for an intervention group (receive PST) and a control group (received the list of resources with the family invitation packet sent out via KDADS. 250 packets were sent to an intervention group & 250 to a control group.

Any family who wanted the intervention was welcome regardless of group assignment.

Families were reimburse \$25 for filling out each set of surveys.

A total of 63 referrals were received, 31 from the intervention group and 32 from the control group.

Family Stories

Briefly describe family situation describe families stated needs and priorities after you went over the needs assessment with them

How did your intervention empower families to increase their current ability to participate in their child's care? Mobilize resources?

How did your intervention help the families to identify concerns of safety as well as any unmet environmental needs? What did you do to address?

How did your intervention help to identify, implement and reinforce specific needs the family identified?

Next Steps

Summarize family stories – make recommendations

Analyze outcomes for intervention and control group

Develop training for providers in the IDD system

Train 5 providers to implement PST intervention

Evaluate implementation & make recommendations for expansion